## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	B. at	10.1	03 45 01	
O.L.P.E. CLASSIFIER	Januar	Carl Berlin	4/2	
FORMALITY REVIEW	MA	954	4/19/01	
RESPONSE FORMALITY REVIEW	710			
	i	1		

## INDEX OF CLAIMS

v	Rejected	N Non-elec	ted
=	Allowed	IInterfere	nce
	(Through numeral) Canceled	A Appeal	
÷	Restricted	O Objected	!

	Date	Claim	Date	Claim	Date
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6 7	++++++++++++++++++++++++++++++++++++	56		106	
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8 9	<del>}                                    </del>	58	+	108	
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15	++++++++++++++++++++++++++++++++++++	64	<del>                                      </del>	114	
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18	<del>                                     </del>	67	+	117	
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20	4	70		120	
Commercial	4	71		121	
22		72	<del>                                      </del>	122	
23		73		123	
24		74	<del>                                      </del>	124	
25		75		125	
26		76	<del>                                     </del>	126	
27	+	77		127	
28		78		128	
30		79		129	
		80	<del></del>	130	
31		81		131	
32		82		132	
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36		85	<del></del>	135	
37	+++++	87	┝┤┽┾┤┽┼┤┤	136	
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39	+++++	89	┝╌┾═╅╌╅═╁╌┤╴╿	138	
40	<del></del>	90	<del>                                     </del>	139	++++++
			┞╌╄╌╂╌╂╌╂╌╏╴╏	140	
41	+++++	91	++++++++++++++++++++++++++++++++++++	141	
42		92	┟╾╁╼╁╌╂╼╁╌╇╌┧┈┤	142	++++
44	+++++	93	<del>╎┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋</del>	143	
45	1-1-1-1-1	94	<del>╎┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋┋</del>	144	
46	+++++	95	<del>╏╶╅╶╏═╏</del> ╌╏═╇╌╄═╂╌┨╴╏	145	+++++
2 46 47	++++++	96	<del>├─┼─┼─┼─┼─┼</del> ─┤	146	
10		98	┝┼╾┼╌┼╾╂╌╂╌┦╴╏	147	<del></del>
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If more than 150 claims or 10 actions staple additional sheet here

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